## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

		CLA	(C	S FILED - Column 1)	PART		ımn 2)		SMALL TYPE	ENTITY	OR	OTHER SMALL	
FOR			NUMBER FILED			NUMBER EXTRA			RATE	FEE		RATE	FEE
BASIC FEE				•		_			345.00	OR	married (Ca)	690.00	
TOTAL CLAIMS / minus 20=				20= *				X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS 3 = *					3 = *				X39=		OR	X78=	
MU	ILTIPLE DEPEN	CLAIM P	RESENT	]	+130=		OR	+260=	/				
* If	the difference	ımn 1 is	less than ze	L	TOTAL		OR	TOTAL	690				
	С		S AS A umn 1)	MENDED	<b>PAR</b> ' (Colur		(Column 3)	;	SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CL REM AF	AIMS AINING TER IDMENT		HIGH NUMI PREVIC PAID	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	* .		Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	<u> </u>		Minus	***		=		X39=		OR	X78=	
	FIRST PRESE	NIAIIC	ON OF MI	ULTIPLE DEF	PENDENT	CLAIM		!   <u> </u>	+130=		OR	+260=	
								L	TOTAL ODIT. FEE			TOTAL ADDIT. FEE	
			umn 1)		(Colur		(Column 3)		)UII. FEE (		• ′		
AMENDMENT B		REM Ai	AIMS IAINING FTER NDMENT		HIGH NUMI PREVIC PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*		Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*		Minus	***		=		X39=		OR	X78=	
	FIRST PRESE	NIAIIC	ON OF M	ULTIPLE DEI	PENDENT	CLAIM		<b>」</b>	+130=		OR	+260=	·
								AD	TOTAL DIT. FEE	<u> </u>	OR	TOTAL ADDIT. FEE	
			umn 1)		(Colur		(Column 3)						
ENT C		REM AF	AIMS AINING TER IDMENT		HIGH NUMI PREVIC PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
<b>AMENDMENT</b>	Total	*		Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*		Minus	***		=		X39=			X78=	
_	FIRST PRESE	NTATIC	ON OF MI	JLTIPLE DEF	PENDENT	CLAIM		J ├─			OR		
• 1	f the entry in colu	mn 1 isl	ess than th	ne entry in colu	mn 2. write	"0" in co	lumn 3.	Ŀ	+130=		OR	+260=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											<u>-</u>		
	The "Highest Nurr	iber Pre	viously Pai	d For" (Total or	r Independe	ent) is the	highest numbe	er found	in the app	propriate box	in col	umn 1.	

## NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION MINEER

Total Fee Calmiants

	<u> </u>	73521 <u>178</u> 25	Augher Sing <u>V</u>		<del>.</del>
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8 w : 31 w ; 5 : :					69
Firef Chicar 8(d)	· . ·	14 ::		شور سو	
Colorador Company	· · · · · · · · · · · · · · · · · · ·	3 ::			·
Medic C ಪ್ರದೇಶ= ಡಾ.ಕ.	<u>:</u>	•			130
Soundhairge	<u>: · · · · · · · · · · · · · · · · · · ·</u>				
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<u> 70704 FT3 CM (7.1.)</u>	<u> </u>				
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Less Filling Fees Statem	.a:1 -: 1		, 		_
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Office of (2012) Passes	le	<del></del>			
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